MAY 1 2 1986

Dec

## OSAGE UIC INSPECTION REPORT

EPA CWS 765/15
REGION VI

( ~	) Initial Inspection		Permit No.
(	) Follow-up Inspection		Inventory No. 4266 Date Inspection 5/1/86 Inspector My
4.	Comapny/Operator Business Address Individual Contacted Lease Name & Well No. (b) (9) Legal Description Well Information: SWD	NONE NAT! +	
7. 8.	Injection Pressure Injection Rate Corrective Actions Comp Records/Files Properly Samples Taken Additional Comments and Obs	this date: _; through Tubing Y _; well equipped Yes cannot dete bing and Casing/Tubing psi; How Determined	No N
9.	Corrective Action Required	of Operator: NSN	
10.	actions taken. If you designay call (918) 287-4041.	report with adequate	P.O Box 1495, Pawhuska, OK 74056 explanation and/or the corrective dinspector by telephone, you
(			Date
Mail to:			Date
			across desk